

North Dakota Department of Health HIPAA Policy

Policy Title:	Security Incidents	
Policy Number:	S-009	Version: 1.0
Reference:	45 CFR 164.308 (a)(6)	
Applicability:	Department of Health	
Approved By:	Dr. Terry Dwelle, State Health Officer	
	Arvy Smith, Deputy State Health Officer	
	Darleen Bartz, HIPAA Coordinator, Privacy Officer	
Effective Date:	April 14, 2003	

Policy:

The NDDoH will monitor all electronic information systems for breaches of security.

Exceptions:

None

Procedure:

- The NDDoH Information Technology (IT) Group will be responsible for monitoring all NDDoH electronic information systems for reported or known security incidents. All identified security incidents will be reported to the Information Security Officer in writing. The Privacy Officer will be notified if the security incident has created a breach in privacy or requires some form of workforce sanction.
- The NDDoH IT Group will respond to all security incidents in an expedited manner to limit the potential harmful effects of the vulnerability. The response to any detected weakness may include, but not be limited to:
 - o Notifying affected divisions and requesting action be taken;
 - o Disconnecting vulnerable devices until the incident has been resolved;
 - o Coordinating with the Information Technology Department on statewide incidents;
 - o Documenting detected vulnerabilities and the steps taken after detection.
- All security incidents will be documented by the IT coordinator directly responsible for the
 system on which the incident occurred. Incidents that affect department-wide systems will
 be documented by the Lead IT coordinator. Documentation should include the incident
 details as well as the outcomes. Documentation of each security incident will be sent to the
 Information Security Officer. The Privacy Officer will also receive a copy of all security
 incidents that have created a breach in privacy or that require some form of workforce
 sanction.

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Related Forms:

None

Definitions:

NDDoH - North Dakota Department of Health

Protected Health Information – Individually identifiable health information that is transmitted or maintained by electronic media or transmitted or maintained in any other form or medium

Individually Identifiable Health Information – Health information which includes demographic information that relates to the past, present or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual and that identifies the individual or there is a reasonable basis to believe the information can be used to identify the individual

Security Incident – Any unusual event that has occurred or been reported, where the event has been verified or the number of occurrences is greater than the acceptable limit. (Examples: reoccurring password violations in logs, viruses detected on multiple systems)